

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of

Joseph Duran Von Arx

Application No.: 10/573,183

Which is a National Stage Entry of
PCT No. PCT/ES2004/000416 filed September 22, 2004

For: **NASAL STIMULATOR**

Docket No.: 600.006

Customer No.: 000058152

URGENT**REQUEST FOR OFFICIAL FILING RECEIPT****AND****SUBMISSION OF POWER OF ATTORNEY AND
CORRESPONDENCE ADDRESS INDICATION FORM**

ATTN: PCT

Office of Initial Patent Examination
Commissioner for Patents
P.O. Box 1450
Alexandria, Va 22313-1450

Dear Sir/ Madam:

Applicant **URGENTLY** requests the Official Filing Receipt for the US application No. 10/573,183 which is a National Stage Entry of PCT application NO. PCT/ES2004/000416 filed September 22, 2004.

Applicant is not aware of the US application number; thus, Applicant is using the PCT number on this request.

Please note that Applicant needs to submit copy of the Official Filing Receipt to the Spanish Patent Office immediately.

In addition, Applicant is submitting herewith a Power of Attorney and Correspondence Address Indication Form.

Best Available Copy

U.S. Application No.

Which is a National Stage Entry of PCT No. PCT/ES2004/000416 filed
September 22, 2004

REQUEST FOR OFFICIAL FILING RECEIPT

Docket: 600,006

All correspondence should be now addressed to:

Evelyn A. Defillo
4922 Eagle Cove South drive
Palm Harbor, FL 34685
727 772-5916

Respectfully submitted,

Evelyn A. Defillo
Evelyn A. Defillo
Registration No. 45,630

DEFILLO & ASSOCIATES
4922 Eagle Cove South Drive
Palm Harbor, FL 34685

727 772-5916 telephone

Date: September 05, 2006

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the foregoing POWER OF ATTORNEY AND
CORRESPONDENCE ADDRESS INDICATION FORM for US Patent Application No.
10/573,183, which is a PCT National Stage Entry of PCT/ES2004/000416
filed September 22, 2004, is being Facsimile transmitted to the Patent
and Trademark Office, Mail Stop: PCT facsimile number (571) 273-3201
Attn: Commissioner for Patents, P. Bo. Box 1450, Alexandria VA 22313-
1450, on **September 05, 2006**.

Evelyn A. Defillo

Name of Person Signing Certification

Evelyn A. Defillo
Signature

Sept 5/06
Date

PTO/SB/81 (01-06)

Approved for use through 12/31/2006. OMB 0851-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

10/573, 183

**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	National Phase of PCT/ES2004/000416
Filing Date	International September 22, 2004
First Named Inventor	Josep Duran Von Arx
Title	Nasal Stimulator
Art Unit	
Examiner Name	
Attorney Docket Number	600.008

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

000058152

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:

OR

☒ The address associated with Customer Number:

000058152

OR

☐ Firm or Individual Name

Address

City

Country

Telephone

State

Zip

Email

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	Date
Name	Telephone
Title and Company	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 36 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

US Application No. -----

Which is a National Stage Entry of PCT No. PCT/ES2004/000416
filed 09/22/2004

Docket No. 600.006

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the foregoing POWER OF ATTORNEY AND
CORRESPONDENCE ADDRESS INDICATION FORM for US Patent Application
No. _____, which is a PCT National Stage Entry of
PCT/ES2004/000416 filed September 22, 2004, is being Facsimile
transmitted to the Patent and Trademark Office, Mail Stop: PCT
facsimile number (571) 273-3201 Attn: Commissioner for Patents,
P. Bo. Box 1450, Alexandria VA 22313-1450, on **September 05,**
2006.

Evelyn A. Defillo

Name of Person Signing Certification

Evelyn A. Defillo
Signature

Sept 15/06
Date

Received Fax : Sep 05 2006 10:56AM Fax Station : DEFILLO & ASSOCIATES

USPTO

9/5/2006 11:54:53 AM

PAGE

1/1

Fax Server

Auto-reply fax to 727 789 6477 COMPANY:

Auto-Reply Facsimile Transmission



TO:

Fax Sender at 727 789 6477

Fax Information

Date Received:

9/5/2006 11:53:03 AM [Eastern Daylight Time]

Total Pages:

4 (including cover page)

ADVISORY: This is an automatically generated return receipt confirmation of the facsimile transmission received by the Office. Please check to make sure that the number of pages listed as received in Total Pages above matches what was intended to be sent. Applicants are advised to retain this receipt in the unlikely event that proof of this facsimile transmission is necessary. Applicants are also advised to use the certificate of facsimile transmission procedures set forth in 37 CFR 1.8(a) and (b), 37 CFR 1.6(f). Trademark Applicants, also see the Trademark Manual of Examining Procedure (TMEP) section 306 et seq.

Received
Cover
Page

=====>

Sep 05 2006 10:55AM DEFILLO & ASSOCIATES 727 789 6477 p.1

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of

Joseph Duran Von Arn

Application No.: _____

Which is a National Stage Entry of
PCT No. PCT/ES2004/000416 filed September 22, 2004

For: NAGAL STIMULATOR

Docket No.: 600.006

Customer No.: 000088152

URGENT

REQUEST FOR OFFICIAL FILING RECEIPT

AND

SUBMISSION OF POWER OF ATTORNEY AND
CORRESPONDENCE ADDRESS INDICATION FORM

ATTN: PCT

Office of Initial Patent Examination
Commissioner for Patents
P.O. Box 1450
Alexandria, Va 22313-1450

Dear Sir/ Madam:

Applicant URGENTLY Requests the Official Filing Receipt for the US application No. _____ which is a National Stage Entry of PCT application NO. PCT/ES2004/000416 filed September 22, 2004.

Applicant is not aware of the US application number; thus, Applicant is using the PCT number on this request.

Please note that Applicant needs to submit copy of the Official Filing Receipt to the Spanish Patent Office immediately.

In addition, Applicant is submitting herewith a Power of Attorney and Correspondence Address Indication Form.

PAGE 12 "REPLY AT 727 789 6477 FAX FROM DEFILLO & ASSOCIATES" FAX 09/05/2006 11:53:03 AM 727 789 6477 FAX 1/1 "DEFILLO & ASSOCIATES"

**This Page is Inserted by IFW Indexing and Scanning
Operations and is not part of the Official Record**

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images include but are not limited to the items checked:

- ☒ **BLACK BORDERS**
- ☐ **IMAGE CUT OFF AT TOP, BOTTOM OR SIDES**
- ☐ **FADED TEXT OR DRAWING**
- ☐ **BLURRED OR ILLEGIBLE TEXT OR DRAWING**
- ☐ **SKEWED/SLANTED IMAGES**
- ☐ **COLOR OR BLACK AND WHITE PHOTOGRAPHS**
- ☐ **GRAY SCALE DOCUMENTS**
- ☐ **LINES OR MARKS ON ORIGINAL DOCUMENT**
- ☐ **REFERENCE(S) OR EXHIBIT(S) SUBMITTED ARE POOR QUALITY**
- ☐ **OTHER:** _____

IMAGES ARE BEST AVAILABLE COPY.

As rescanning these documents will not correct the image problems checked, please do not report these problems to the IFW Image Problem Mailbox.